Patient Care Workgroup Priorities

The top priority for development over the next five years is a summary view of information (current and historical) pertaining to a patient from across all sources of care that includes the elements listed below.

Intermediate goals include transmission of information between clinicians and between clinicians and service providers by efficient electronic point-to-point communications.

Ability to view original documents (e.g., laboratory results or clinic notes) is considered a valuable adjunct to the shared patient summary for validating or clarifying summary information or to obtain greater detail.

The following types of data were identified as having highest priority for viewing, ranked by clinical committee members. To the extent possible data should be normalized for easy importation into EMRs and other applications.

Priority	*Rank*	*Possible Data Sources*	*Possible Privacy/Security Concern*
Identity/demographics	1	*Claims EMR CCR*	
Diagnoses/encounter diagnoses	2	Claims, EMR, CCR	
Medications	3	Pharmacies, EBMs and Claims, EMRs and e-prescribing programs	
Allergies	4	EMR, CCR, pharmacy records, medication reconciliation document	
Labs and other diagnostics (results reporting)	5	Claims, CPOE (for orders); Electronic lab reporting, EMRs (for results)	
Procedures	6	Claims, CCR, EMR	
Immunizations	7	WIR, RECIN	
Patient visits and hospitalizations	8	Claims, CCR	
Discharge summaries and progress notes	9	Access attached to encounter records	
Patient contact-in-emergency	10	Patient entry	
Advance directives	11	Patient entry	
Payer/insurance coverage/eligibility	12	Same	